

Working in partnership with
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health

Public Health Bytes

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Henrico Health Department
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On the web at: www.publichealthbytes.org

PANDEMIC ALERT PHASE: 3

Communicable Diseases Update: Influenza Update: Surveillance data provided by sentinel medical providers indicated an increase in influenza-like illness (ILI) during February in Virginia. We have seen the same here in Henrico. As a result, the VDH reported a "Widespread" ILI activity level for the state (defined as increased ILI and/or institutional outbreaks in at least half of the regions in the state and recent lab confirmed influenza within the state), starting the first week of February continuing through the present time. During the current influenza season, the state laboratory reported that 97% of the positive test results have been influenza type A. Among the influenza type A viruses, 95% have tested positive for the H3.

Pertussis Update – Part One: Since the 1980's, reported pertussis incidence has increased. Several reasons for this increase include improvements in diagnosis and reporting of cases in adults and adolescents. In Virginia, the number of pertussis cases from 2002-2004 more than doubled (168 cases reported in 2002 and 400 cases reported in 2004). **Early reporting of suspected or confirmed** pertussis cases to the local health department is essential for public health intervention to be most effective. Please report all suspected or confirmed cases of pertussis to Henrico County Health Department within 24 hours of diagnosis by the most rapid means available (report via phone to 804-501-4522 or fax Epi-1 report form to 804-501-4232). The health department can also help facilitate laboratory testing (including PCR, culture and DFA) through the state laboratory (DCLS). Pertussis testing kits (containing nasopharyngeal swabs for testing) will be delivered by the health department to your practice upon request (and specimens will be picked up by the health department for transport to the state laboratory) for patients with prolonged cough illness (at least 10 days) and **at least one** of the following: paroxysms of coughing, inspiratory "whoop", or post-tussive vomiting. Testing is generally not recommended if greater than 21 days from onset of illness. **Serological testing for pertussis is not recommended** because the FDA has not approved any test to date and the laboratory results are difficult to interpret. DFA testing should only be used as a screening test in conjunction with culture and PCR. Please contact Seth Levine at (804) 501-5216 for further information. **Part two** will focus on management.

Emergency Preparedness Update: Henrico Health Department continues to promote pandemic flu preparedness following the guidance of the Federal Pandemic Flu Plan (www.pandemicflu.gov) and the VDH Pandemic Flu Plan (www.vdh.virginia.gov/pandemicflu). Specific steps taken to prepare the local community include revising our plans and capabilities for public distribution of vaccines and antivirals, development of a public health volunteer program (Medical Reserve Corps), enhancing our disease surveillance capabilities, and developing plans for Isolation & Quarantine. But the most important part of our planning is outreach to the local community, especially the healthcare community. We have begun to meet with hospitals, home health care agencies and physician groups, and would appreciate feedback from you to let us know your questions and concerns. Please e-mail any comments or questions you have to Health Department Emergency Planner (michael.magner@vdh.virginia.gov) or the Health Director (mark.levine@vdh.virginia.gov).

1) Medical Reserve Corps (MRC): The Henrico Medical Reserve Corps recently completed its first orientation session on Feb 16, 2006. Fifty MRC volunteers were present for this session. Since the recruitment drive began in January of this year, over 150 volunteers have signed up. The next session will be held on Tuesday, March 21, 2006. For more information on the MRC, or to join, please go to www.co.henrico.va.us/health/mrc.htm.

2) Practice Emergency Preparedness: Please advise your patients to plan for an influenza pandemic by reviewing the CDC's Checklist for Individuals and Families (See <http://www.pandemicflu.gov/planguide/checklist.html>). In addition, ensure that your facility is also prepared by reviewing the DHHS Pandemic Flu plan for healthcare facilities at <http://www.hhs.gov/pandemicflu/plan/pdf/S03.pdf>

Prevention updates: Preventing Tetanus, Diphtheria and Pertussis among Adolescents - CDC just released ACIP guidelines concerning adolescent vaccination for the above diseases. The complete report is available at: <http://www.cdc.gov/mmwr/PDF/rr/rr55e223.pdf>. Briefly, clinicians are encouraged to vaccinate children ages 11-18 with one of the two newly released reduced diphtheria toxoid and acellular pertussis vaccines (Tdap). An interval of ≥ 5 years is recommended between Td and Tdap (to minimize side effect risk). Adolescents receiving Tdap should also be offered tetravalent meningococcal conjugate vaccine, if indicated, and can receive that during the same visit.

Training/Publications:

1) Save the Date! Isolation and Quarantine Training; April 26th Sheraton Park South, Midlothian Tpk. More to follow...

2) Publication Update: Physician's Guide to Intimate Partner Violence and Abuse - A Reference for All Health Care Professionals by Patricia Salber, MD and Ellen Taliferro, MD. This is the updated and expanded edition of "Physician's Guide to Domestic Violence," first published in 1995. This reference can be ordered at www.volcanopress.com/

3) Attention child healthcare providers: Web Based Training - The Virginia Department of Health (VDH) has developed a web-based training course for health care providers to learn the **Bright Futures** guidelines for supervising the care of their infant, child and adolescent patients. Physicians, nurse practitioners, clinic nurses, school nurses, dentists, social workers and dietitians are urged to access the course at www.vcu-cme.org/bf.

4) Virginia Pandemic Influenza Summit - By invitation on March 23, 2006 in Richmond with DHHS Secretary Leavitt. See <http://www.vdh.virginia.gov/epr/panflusummit.asp>

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